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1	UNITED STATES DISTRICT COURT DISTRICT OF NEVADA		
2	BEFORE THE HONORABLE NANCY J. KOPPE, MAGISTRATE JUDGE000		
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4	Amarin Pharma, Inc., and Amarin Pharmaceuticals	: : No. 2:16-cv-2525-MMD-NJK	
5	Ireland Limited,	: NO. 2.10 CV 2323 FMD NOT	
6	Plaintiff,	: : January 14, 2019	
7	-vs-	:	
8	Hikma Pharmaceuticals USA, Inc., et al.,	United States District Court333 Las Vegas Blvd	
9	Defendant.	: Las Vegas, Nevada	
10		:	
11	TRANSCRIPT	OF MOTIONS HEARING	
12			
13	<u>APPEARANCES</u> :		
14	FOR THE PLAINTIFF: Christopher N. Sipes Jason D. Smith Michael Kennedy Attorneys at Law		
15			
16	FOR THE DEFENDANT: (Constance Huttner	
17		Michael Rounds Caroline Sun	
18		Wayne Shaffer Alan Clement	
19	Eimeric Reig-Plessis Attorneys at Law		
20	NJK/FTR: 011418@2:06pm	•	
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22	Proceedings recorded by digital recording, produced by computer-aided transcript		
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24	Transcribed by:	KATHRYN M. FRENCH, RPR, CCR NEVADA LICENSE NO. 392	
25		CALIFORNIA LICENSE NO. 8536	

THE COURT: Good afternoon, Ms. Huttner.

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MS. HUTTNER: Good afternoon, Your Honor.
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                            MS. SUN: Caroline Sun from Budd Larner, also
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             representing Dr. Reddy's Lab.
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                            THE COURT: Thank you. Good afternoon,
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             Ms. Sun.
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                            MR. ROUNDS: Michael Rounds from Brownstein
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             Hyatt, Your Honor, representing the Dr. Reddy's defendants.
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                        Good afternoon to you.
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                            THE COURT: All right. Good afternoon,
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             Mr. Rounds.
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                            MR. CLEMENT: Alan Clement from the Law Firm of
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             Locke Lord on behalf of Hikma West-Ward.
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                            THE COURT: Thank you. Good afternoon,
             Mr. Clement.
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                            MR. REIG-PLESSIS: Eimeric Reig of Winston &
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             Strong, also for defendants Hikma and West-Ward.
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                            THE COURT: All right. Good afternoon,
             Mr. Reig.
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                        I think that's everyone.
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                        Is that correct?
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                            MR. SHAFFER: One more, Your Honor.
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                            THE COURT: Sorry.
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                                           This is Wayne Shaffer, also on
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                            MR. SHAFFER:
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             behalf of Hikma, Laxalt & Nomura.
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                            THE COURT: All right. Mr. Shaffer, good
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afternoon. I didn't mean to leave you out.

All right. So, we're here today on two motions:

The defendant's Emergency Motion to Modify the Scheduling

Order, which is docket number 165; as well as the plaintiff's

Motion to Amend the Preliminary Validity Contentions, docket

number 168.

The Court is aware that the parties wanted to discuss the first motion at this hearing, but, really, they're kind of intertwined with each other, so if the parties want to argue both of them, we can address both of them today.

MR. SIPES: We're happy to do so, Your Honor. This is Christopher Sipes.

THE COURT: All right. So let's start with the motion to amend preliminary validity contentions. And, plaintiffs, that's your motion.

MR. SIPES: Your Honor, so what we had flagged in our original validity contentions back in July of 2017, the fact that we would be relying on the results of an ongoing clinical outcome trial, which was the cardiovascular effects of the drug product for Vascepa when is read out. The product read out this fall and the first publication of the results was on November 10th. It was announced at the American Heart Association conference in Chicago and published online in the New England Journal of Medicine. That was after the close of fact discovery, so we then put together supplemental

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contentions and reached out to the defendants on December 7, raising the idea of supplementing at that time and we provided them, three days later, with the proposed supplement to our validity contentions.

The parties have known that REDUCE-IT was a part of this case since our contentions, and they deposed one of our 30(b)(6) witnesses, Dr. Ketchum on October 24th on the REDUCE-IT results. The top line results were announced, as I understand it, the data collection, the database, so to speak, was locked in September, was analyzed. The topline results were announced by the company in September 24. That was what they had then. They were then analyzing the results they were working with, you know, the outside researchers such as (unintelligible). And the first availability of the full analysis in the New England Journal was November 10, and there had been some follow-on publications that are also referenced in our supplemental contentions.

So, we believe we acted diligently. We flagged in our original contentions. There's no question defendants were aware of our reliance on REDUCE-IT. And pretty promptly upon the availability of the full analysis, we moved to supplement. We reached out to defendants to do so. We met and conferred with them. We provided them with our supplement. So, they had notice of our intent to supplement since December 7th. They've had the actual proposed supplement since

December 10th. And as they acknowledge in their own papers, they don't need to respond to this in their expert reports until March 11th in their second round.

So, I believe we've been diligent. We've shown good cause. REDUCE-IT is plainly relevant to this case. In fact during litigation, there own expert, you know, in pointing to the claims at issue in the case, which are for, among other things, to various affects on lipid parameters, said wall. For lipid parameters, you need the outcome evidence. Well, now, we have the outcome evidence, so we see this as plainly relevant, important to the case, and we've done everything we can to be diligent.

THE COURT: All right.

Defendants, whomever is --

MS. HUTTNER: Yes. It's Connie Huttner, Your

Honor.

THE COURT: All right.

MS. HUTTNER: Let me, let me first address the motion to supplement. This study -- and just so you understand, this is a multi-year study involving -- I think it went on for seven years, involving thousands of patients. And it's been ongoing, I think, since 2011 or 2012. So, yes, they did put a placeholder in their, their original validity contentions, but the topline results of the study is of, uh -- plaintiff's counsel conceded, were announced in September --

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they were actually learned by the company, according to what counsel has told us, in mid September. We did attempt to depose their 30(b)(6) designee on the results of the study. We were told that the study had not been analyzed yet. And I understand that, at that point in time, the statistical analysis of the study results was ongoing.

of Medicine, which was published on November 10th, but which had to, under the publication rules of that journal, had to have been submitted to them, probably, but late September or the first week in November at the latest. They could have a process of a topline results and produce the data in September prior to the close of discovery. They did not do that.

Similarly, they did not elect to provide us with any data or any <u>New England Journal of Medicine</u> article, or inform us that that article was going to be published until, uh, you know, we were contacted on December 7th, to see if we would consent to the supplementation. I believe the journal article, as it was published, was originally only available to subscribers of the journal. So it's not something, uh, that necessarily came to our attention.

In any event, Your Honor, the <u>New England Journal of Medicine</u> article only includes a small subset of data from the study. We had been told by plaintiff's counsel that the final study report, which will contain information that our experts

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tell us they need to analyze, will study and determine whether it shows what it purports to show, will not be available until, according to what they told us, the end of the first quarter of this year; so, the end of March. And under the current schedule that we have, that would mean not only would we not see what they were prior submitting in their opening expert reports, but we would not see a final studying report prior to submitting our response to the expert reports, which is when, you know, they're saying that we need to deal with

So, you know, what we're asking for here, Your Honor, is, really, fundamental fairness. They took almost two months to analyze the data to determine whether or not they even wanted to rely on it. It seems to us that we ought to be getting at least equal time to analyze the data on the other side, particularly since we don't have access, as they do, to investigators who were involved in this study. And one of their experts was one of the principal investigators in this study.

So, our experts are going to need a chance to analyze the data. And in order to do that, they need either the data itself, or a copy of the final study report; or, if there's a reasonably complete draft, you know, that could be provided along the way. But without that, you know, we're pretty much just shooting in the dark because, as I said, the

New England Journal of Medicine article contains a small 1 06:19:25 2 subset. It does not contain all of the analyses that I 06:20:02 06:20:07 3 understand that they're planning to include in the final study report, or even some of the analyses that they've done 06:20:12 4 since the publication date of New England Journal of Medicine 06:20:21 5 And not ought we to get that material, Your Honor, 06:20:40 6 7 but we ought to be able to depose someone, you know, to make 06:21:15 8 sure that we have a complete understanding of what's been 9 produced, just as we would have done, had they provided this 10 information during the discovery period.

We took discovery on all of the so-called objective evidence, obviously, that they identified. As I said, we did try to take discovery on the REDUCE-IT study as well, but we were frustrated and weren't able to do that because the study results weren't yet available. So that's what we're asking for.

I don't believe they were diligent in amending their contentions. As we pointed out in our responsive brief, you know, they had issued, I think, a total of eight patents.

The results of the REDUCE-IT study, those patents were filed and prosecuted and issued before the study was complete, so, obviously, we anticipated what the results of the study would be. They could have included a similar disclosure in their original validity contentions. They can amend it at anytime since filing the validity contentions to include what they

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anticipated what those results would be, based on whatever (unintelligible) issue that they had during the study.

Now, obviously, that was a situation to enable them apply for patents. They could have, they could have apprised us of that and give us a chance to take discovery on that.

And, they could have provided us with the results as they obtained them. But now where we are, and, you know, we're being asked to -- in fact, you know, for them to have an (unintelligible), you know they can take two months to analyze the study and results to see if it benefits their side, but they don't want to give us any time or change the current schedule to allow us, you know, to look at it from the defense's point of view.

The only prejudice that they've identified is the possibility that the Court will not be able to decide this case prior to the expiration of there's an automatic (unintelligible) stay here that expires in January of 2020. I'm -- you know, I would submit two things, Your Honor. One, under the current schedule, summary judgment motions are due in June. And to the extent that summary judgment motions are filed, the Court's schedule indicates that no trial date will be set until after the Court decides those motions and, obviously, you know, there's no guarantee that the Court will decide those motions prior to January; or, even if it does, that it will be able to set trial and then decide the case

prior to January, even if there were no change in the
schedule. Neither defendant has an FDA approval at this
point. You know, there's nothing -- I mean, it's completely
speculative at this point as to what impact, if any, you know,
extending the trial out a brief two months would, as far as
setting -- extending the schedule by two months would have any
impact. And, you know, I don't think that's enough prejudice
to basically say you're not entitled to the time to look at
this data and analyze it with their experts and take
discovery.

THE COURT: All right.

All right. And regarding that motion to extend the discovery deadlines, what is the plaintiff's position?

MR. SIPES: Yes, Your Honor. This is Christopher Sipes again.

So, there's two points. One is the delay and then the other is the information they want. Let me start with the information, uh, they want, and then we can talk about the delay.

(Unintelligible) one, there is an acknowledgement that they say themselves when they deposed Dr. Ketchum October 24th, the analysis was not even then complete. So, clearly, the REDUCE-IT results were not available until very close to November 10th publication date.

In terms of the data, they have the publication,

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meaning journal publication. We've, in addition, offered
them the near final draft of the body of the clinical study
report, which is the data and analysis being submitted, as I
understand it, to FDA when its ultimately submitted to FDA,
when the agency reopens, but also when all the final data is
applied. And we've offered to give them that by the end of
the month.

What they seem to now be asking is not even for that, but for all of the individual patient data, which they even disclaimed originally that in their papers. They said they would be fine with summaries or tabular data; that is, which should be the body of the report. So, it would be unbelievably burdensome. This is a more than 8,000 patient study over five years, so the database of individual patient data is enormous. And as you can imagine, there are a lot of issues with individual patient data, making it part of litigation. We don't understand in their papers that they're continuing to ask for that because they said themselves in their reply paper, uh, Document 173, that they would be fine with summaries or tabular data. So the body of the clinical study report, a draft that's available, then should satisfy any need for additional data.

I should point out here, Your Honor, that in general in these patent cases, people rely on publications. And here, we're talking about the New England Journal of Medicine, which

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is, clearly, a reliable publication. You know, they're relying on lots of clinical trials where they just rely on the publication. They're not providing underlying study data; for example, what the JELIS study did. And it would be unbelievably burdensome to give them the database as enormous as the REDUCE-IT database.

And so in terms of the data and analysis that goes beyond the <u>New England Journal</u>, we can give them the draft of the clinical study report by the end of the month.

In terms of -- we've tried to meet and confer -your colleagues have cut that off -- to work out something, including potentially giving them extra time, but then this is not a case where it's going to be disposed upon dispositive motions. It's a bench trial case. We can respond to the delay that they're asking for by, at the back-end, you know, not having dispositive motions. The problem is, as they push it further and further back, all the risk is on our side because the stay on approval is in January of next year, 2020, and we need to get the case tried before then, you know, resolved before then, so that we can vindicate our patent rights before they can get final approval and potentially launch their product in derogation of our patent rights. We feel that they're asking for delay when they don't need it and the risk is all on our side. And they've acknowledged -their response on the REDUCE-IT is in the second line reports.

Even now, that's not due until March 11th. 1 06:49:08 2 So, yeah, we'll give them the clinical study report 06:49:13 06:49:24 3 by at the end of the month and they'll have, you know, a month-and-a-half to analyze that for their second round 06:49:27 4 06:49:32 5 reports. 6 MS. HUTTNER: Your Honor, if I may --06:49:37 7 THE COURT: Yes. 06:49:40 06:49:42 8 MS. HUTTNER: -- respond briefly. 9 THE COURT: You may. 06:49:44 The offer to provide a near final 10 MS. HUTTNER: 06:49:50 11 draft, as Mr. Sipes put it, of the final study report was 06:49:55 12 contingent on us agreeing to drop any right to move for 06:50:12 06:50:17 13 summary judgment on the current schedule. So, you know, from our perspective, that was a non-offer. And the reason 06:50:23 14 15 why it was a non-offer, from our perspective, is because 06:51:08 there are, right now, a considerable number of claims that 16 06:51:12 06:51:22 17 are being asserted by plaintiffs, but we do not believe that 18 we infringed, and that those can be resolved on motion. 06:51:38 may be that plaintiffs drop some of those claims, or drop all 19 06:51:59 20 of those claims. I don't know what they're going to do. 06:52:06 21 at the present time, it would be, you know, irresponsible for 06:52:16 06:52:28 2.2 us to agree to give up the right to move for summary judgment, 23 and certainly not as a condition of getting discovery that we 06:54:49

should get as a matter of course. So, you know, that's where

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that went.

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Mr. Sipes seems to be suggesting that he's willing to give it to us now and we would be happy to have whatever they want to produce as soon as they can produce it, but the point is that, you know, we need an opportunity to analyze what's written.

As far as the study data itself, I'm not sure why, you know, this is being perpetuated here. We've made it very clear we have no interest in patient HIPAA nor HIPAA sensitive We don't care about the identity of the patients. We're more than happy to work with them to try to narrow our request, but we've been unable to get from them even an index to what they anticipate having in what they call appendices to the study, which is, you know, where the actual data is going to be lodged, I gathered. But, we don't even have a list of what they claim to include to be able to say, you know, we need this or we want this or we don't want that or to work with them. You know, we've also told them we're happy to work with them, you know, to obtain information in tabular format because, frankly, we have no interest in getting a morass of data that, um, you know, is difficult and expensive to analyze. So for farther down the road, you know, they're doing an analysis that they're doing anyway to (unintelligible) for us, which is why we would like to get a copy of the final study report before we have to respond to whatever it is they're going to say about the REDUCE-IT study.

So, you know, that's really, you know, what's 07:01:12 1 2 critical here. I mean, I -- they say that all the risk is on 07:01:23 07:01:33 3 them, I'm not even sure what that means. I mean, we cannot launch without getting FDA approval. We don't have FDA 07:01:40 4 approval. They will, you know, undoubtedly, win on the FDA 07:01:48 5 approval, you know, when and if we even get it, at whatever 07:02:12 6 7 point that is. They'll have ample opportunity, if we're not 07:02:42 07:02:54 8 able to work something out, they'll have ample opportunity, you know, to move for injunctive relief, if need be, which 07:03:00 it may never be needed because timing of (unintelligible) 07:03:12 10 11 timing here is uncertain. The timing of the judge's review 07:03:37 12 of summary judgment motions, assuming they're filed, is 07:03:53 uncertain. And the timing of any trial date, even if the 07:04:06 13 judge resolves the summary judgment motions is uncertain. 07:04:25 14 15 And I think, you know, with the current schedule, I think the 07:04:29 odds are probably against the judge deciding summary judgment 16 07:04:48 07:04:53 17 motions, scheduling the trial, and deciding the trial before 18 the, you know, the 30-month stay expires in January. But 07:04:58 07:05:13 I don't want to leave you with the impression that once the 19 20 30-month stay expires, that we're, you know, that we're on the 07:05:50 21 market, you know, immediately. I mean, they'll be -- this 07:06:08 07:06:28 2.2 will all get sorted out as, you know, we get closer to that 23 point in time, both in terms of whether there's going to be 07:06:32 summary judgment motions, what the Court's schedule is, and, 24 07:06:36 07:06:47 25 you know, what the regulatory time frame is.

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So, you know, there's no risk to them here. You know, I don't, I don't really see -- I mean, normally, the brand is the one that wants to extend things out as long as possible and, certainly, there have been many instances in the past where cases have been decided after the 30-month stay had ended, whether by agreement or because there was a regulatory approval or otherwise. And so there's nothing unusual or surprising there.

THE COURT: All right.

MR. SIPES: Your Honor, if I could just briefly. This is Christopher Sipes.

THE COURT: All right.

MR. SIPES: To be -- one, I'm not entirely sure now what data they're asking for, you know, whether they're fine with, you know, the summaries that are in the draft clinical study report, or whether they want individual patient data, which is more than 8,000 patients over five years is an enormous database. So, that, I just don't understand. If they're willing to have the summaries, then I think the draft clinical study report should be fine.

In terms of timing, it's true that there are cases that go on beyond the 30-month stay. In my experience, when that happens, the defendants agree not to launch without 30 days notice, so that there's an opportunity for a preliminary injunction practice. What is otherwise being

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suggested is that we're at risk with having to come in with a TRO if they suddenly get final approval. We don't think that's fair to us. We don't think that's fair to the Court. And we should have an opportunity to have an orderly process if the delay here means we're going to go beyond the 30-month stay.

And, Your Honor, I think that MS. HUTTNER: that's a discussion that we can have down the road. But, at the moment, you know, they have no guarantee that the case is going to get decided before the 30-month stay ends anyway. So, you know, as we get closer to that, to January 2020, when the stay expires, we can have all those discussions, if they're appropriate, at that time. But, right now, I think the issue is whether they're going to suffer some sort of prejudice if they schedule these out two months in order to give the time to review, you know, the final study results before we have to comment on them. You know, you're asking experts to put in an opinion, you know, whose professional opinion analyzing that study, and I don't think it's appropriate to do that with incomplete data. I reiterate again we're not looking for individual patient data, or would be -- you know, we had a long discussion. There was a call that we had to try to resolve this. I don't remember if it was last week or the week before. But, you know, we had a discussion at great length at that time trying to narrow

down -- you know, we explained to them what we were interested in and, uh, I don't know whether the draft that they're talking about includes that or not, but it's something that they were going to check on. And the response was, you know, that they sent back was equivocal as to what's going to be in the final study report.

So, you know, I'm happy to have a dialogue with them, you know, to try to narrow what we want. We're not interested in getting a lot of data that would take us, you know, a lot of time and money to analyze. You know, so, you know, this is not a situation -- we're not looking, certainly not looking to invade anybody's HIPAA privacy. You know, we're not looking to get personal data. We're not looking to violate HIPAA here. We're just looking for the data that our experts are telling us that they need to analyze whether the results of the study in fact purport to show what they say it shows, and to analyze the nexus issue, uh, which, you know, as we explained in our reply brief, you know, we think that doesn't exist here. But, you know, that's really -- this, I think is a Red Herring that we're looking for individual We're not. patient data.

THE COURT: All right.

All right. The Court finds that -- I'm going to start with the later motion, the Motion to Amend the Validity Contentions. It's docket number 168. The Court finds that

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the plaintiffs have been diligent and that there is good cause to amend those validity contention, so the Court is going to grant that motion.

The Court also finds, however, that granting that motion without providing an extension of the discovery deadlines to defendants would be prejudicial to the defendants. So, the Court is going to grant the Motion to Modify the Scheduling Order at docket number 165, and is going to -- there are proposed modification dates set forth on page 6 of that motion. The Court is going to order that those are the new deadlines.

Regarding the information about the patient data, whether it's summaries or what the discovery should be, first of all, that's not really briefed before the Court at this point. And secondly, it sounds as if the parties are, essentially, if not on the same page, very close to the same page regarding that information. So, the Court is going to defer ruling on that issue at this time. If the parties, of course, cannot agree, after meeting and conferring about this issue, then either or both of the parties can bring that issue before the Court.

Is there anything else on this -- oh, the second motion was docket number 165.

Is there any --

MR. CLEMENT: Your Honor, Alan Clement on behalf

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of West-Ward Hikma.
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                            THE COURT: Yes.
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                            MR. CLEMENT: Just taking in conjunction with --
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             when we set those dates out there, we were also asking for one
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             7-hour deposition or, you know, depo or less, should we now
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             need it, to take a deposition limited to the new information
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             that plaintiffs provide.
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                            THE COURT: Right. That request is granted as
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             well.
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                            MR. CLEMENT: Great. Thank you, Your Honor.
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                            THE COURT: All right. Is there anything else
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             on either of these matters.
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                            MS. HUTTNER: Not from defendants, Your Honor.
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                            MR. SIPES: No, Your Honor.
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                            THE COURT: All right. Thank you, everyone.
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                            MS. HUTTNER:
                                           Thank you.
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                            MR. SIPES: Yes.
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                        (Court Adjourned.)
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3	I certify that the foregoing is a	correct			
4	transcript from the record of proceedings in the above-entitled matter.				
5	\s\ Kathryn M. French	January 16,	2019		
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7	KATHRYN M. FRENCH, RPR, CCR Official Reporter	DATE			
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